Psychological Implications of COVID-19 on Kabul based Citizens of Afghanistan

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Abstract

As a result of the emergence of COVID-19 outbreak caused by severe acute respiratory syndrome coronavirus infection in the Chinese city of Wuhan, a situation of economic and mental distress promptly happened across the world. Various mental health issues like stress, depression, anxiety, frustration and uncertainty aroused gradually. This paper aimed to comprehensively review the implications of COVID-19 on the mental health in the general public. The psychological effect of quarantine period related to COVID-19 infection also documented together with most relevant mental reaction in the general public related to COVID-19 outbreaks. The main consequences of the present findings have been conferred.

Keywords: COVID-19, Psychological health, Stress, Afghanistan.

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Introduction

The COVID-19 pandemic is revolving out to be a major reason of stress and depression for most of the population in the world. No one has such an abnormal event experienced in the past. The preliminary focus is essentially on the physical concerns of the infection; however, there is severe and significant mental concerns emerging out of this misfortune need to be addressed. (Xiang YT et. al., 2020) Many mental issues and vital concerns including: anxiety, stress, depression, frustration and uncertainty during this pandemic emerged. Common mental reactions related to guarantine which was imposed on public in order to control the COVID-19 community spread further and created fear and community anxiety which are naturally accompanying with disease outbreak. It has increased with inadequate and depression provoking information provided by media. Such information leads panic behavior or persistent feelings of nervousness and fruitlessness which are concerned with negative outcomes including miserable behavior. Prominently other health measures may be comprised by abnormal raised anxiety.

1.1. Research questions

• What is psychological implications of COVID-19 on citizens of Kabul, Afghanistan?

1.2. Research objective

 To identify the psychological implications of COVID-19 on citizens of Kabul, Afghanistan

2. Literature Review

2.1. Acute stress disorder

Eight publications, including commentaries (n = 4) and correspondence (n = 5) addressed the potential mental health impact of COVID-19 on the general population, based on literature from previous disease outbreaks or specified theoretical models. There was greater geographical diversity in this group of publications, with papers originating from China, Canada, Iran, Japan, Singapore and Brazil. Two of these papers examined the likely impact of the COVID-19 pandemic in specific countries. One of these, from Iran (Zandifar and Badrfam, 2020) highlighted the role of unpredictability, uncertainty, seriousness of the disease, misinformation and social isolation in contributing to stress and mental morbidity. The authors highlighted the need for both mental health services, particularly for vulnerable populations, and the strengthening of social capital to reduce the adverse psychological impact of the outbreak. Another, from Japan (Shigemura *et al.*, 2020), emphasized the economic impact of Covid-19 and its effects on

well-being, as well as the likely high levels of fear and panic behaviour, such as hoarding and stockpiling of resources, in the general population. This paper also identified populations at higher risk of adverse mental health outcomes, including patients with COVID-19 and their families, individuals with existing physical or psychiatric morbidity, and healthcare workers. ght publications, including commentaries (n = 4) and correspondence (n = 5)addressed the potential mental health impact of COVID-19 on the general population, based on literature from previous disease outbreaks or specified theoretical models. There was greater geographical diversity in this group of publications, with papers originating from China, Canada, Iran, Japan, Singapore and Brazil. Two of these papers examined the likely impact of the COVID-19 pandemic in specific countries. One of these, from Iran (Zandifar and Badrfam, 2020) highlighted the role of unpredictability, uncertainty, seriousness of the disease, misinformation and social isolation in contributing to stress and mental morbidity. The authors highlighted the need for both mental health services, particularly for vulnerable populations, and the strengthening of social capital to reduce the adverse psychological impact of the outbreak. Another, from Japan (Shigemura et al., 2020), emphasized the economic impact of COVID-19 and its effects on well-being, as well as the likely high levels of fear and panic behaviour, such as hoarding and stockpiling of resources, in the general population. This paper also identified populations at higher risk of adverse mental health outcomes, including patients with COVID-19 and their families, individuals with existing physical or psychiatric morbidity, and healthcare workers.

Bai *et al.* (2020) explained in his study that seventeen (17) staff members reported an acute stress disorder. The most relevant factor was quarantine. They further determined that a unified administrative and psychological response to the occupational and psychological challenges caused by COVID-19 outbreak is needed.

Sprang and Silman. (2013) in their cross-sectional study done on 398 respondents, had found that the mean post-traumatic stress scores were four times higher in children who had been quarantined compare to those who were not. They further explained that pandemic disasters need strategies to guarantee behavioral health needs of both adults and children.

2.2. COVID-19 and depression

Liu *et al.* (2020) identified that 9% of 549 hospital's staffs were having higher depression like symptoms. 60% of it had been quarantined while only 15% of it have minor symptoms and had been imposed restrictions.

2.3. MERS, SARS and Anxiety

Jeong *et.al* had done study in South Korea on isolation due to having contact with MERS patient. The study found that anxiety symptoms found in 7.6% and feelings of anger found in 16.6% people during the isolation period.

Reynolds et.al in their cross-sectional study found that during SARS 20% people reported fear, 18% nervousness, 18% sadness and 10% guilt among the general public.

2.4. Mental health issues of Home quarantine

Quarantine is defined as separation of people who have been exposed to a contiguous disease to ascertain whether they become sick and further reduce the risk of infection to non-infected people. (Brooks SK et. Al 2020)

Social distancing refers to certain measures taken to slow down or stop the highly contagious disease which includes: closing down public buildings like schools, universities, large gathering, social events, etc. (HHS Publication, 2014)

After declaration of COVID-19 as pandemic by WHO, first three months most of countries declared combination of these measures to stop the spread of COVID-19 infections.

2.5 COVID-19 and mental health in older adults

Sleeplessness, boredom, feelings anxious, panic attacks, fear of contacting Covid-19, stress, depression were very much common observed feelings of most people across the world. (Yao H, et.al, 2020)

3. Research methodology

The study has been done through quantitative approach and is based on questionnaire developed and filled up from general public of Kabul, Afghanistan.

3.1. Instrumentation and operationalization

Five set of questions were developed from the previous articles and researches. Respondents were asked direct questions related to mental health implications due to COVID-19. Closed ended questions were asked from respondents.

Sample and sampling technique: The study conducted in Kabul Afghanistan. Population was citizen of Kabul. The stratified sample technique was used in this study to check psychological effects of COVID-19 on general public. For this study population divided into five groups name as 1. Public who were maintaining social distancing/ isolation and another who were not, 2 publics who are earning and covid-19 negative effect their

income and another who's income didn't effect, 3 Public with poor physical health another one with good physical health, 4 Public who use social media information as a tool for news another who were not using such information, 5 publics who suffering from basic necessity items another who didn't have such sufferings. As total number of population was unknown, so based on the sampling table suggested by Krejcie and Morgan (1970), 382 participants as minimum sample size is required to carry out the analysis. However due to current situation only 350 people participated in the study.

3.2. Data Collection procedure

For each group separate question was asked and then for general public for each question, there were separate people targeted, as below:

- **Question 1:** Psychological health risk due to social distancing/isolation those people who stay with family and without family. Total of 100 people responded.
- **Question 2:** Psychological health risk due to loss of job and income insecurity. Total of 90 people responded.
- **Question 3:** Psychological health risk due to poor physical health. Total of 70 people responded.
- **Question 4:** Psychological health risk due to social media information. Total of 40 people responded
- **Question 5:** Psychological health risk due to lack of necessity items. Total of 50 people responded.

4. Findings and Analysis

4.1. Psychological health risks due to social distancing (stayed at home)

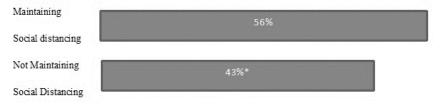
Due to COVID-19 crisis, most of the provinces and local governing bodies were closed of non-essentials industries and academic institutions, elimination huge assemblies, and requiring quarantine for travelers, along with this there was encouragement of social distancing.

In the most of cities, it was declared as mandatory to stay at home for all non-essential employees. The main theme of this study links social distancing/isolation to poor mental health.

The study has conducted based on opinion poll during month of June and July 2020. In Figure 1, the study found that 56% of those who stayed at home (Social distancing) reported negative mental health effects resulting from stress and depression related to COVID-19.

The rate is significantly higher than the 43% among people who were not maintaining social distancing/isolation.

Figure 1: Percent of Adults who say stress or depress related to COVID-19 has had negative psychological health based on social distancing/stayed at home



Note: * indicates a statistically significant difference between those maintaining social distancing and those who were not maintaining social distancing at the P < 0.05 * level.

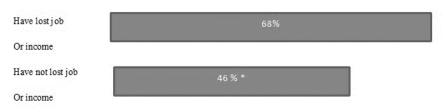
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4.2. Psychological health risk due to loss of job and Income insecurity

According to ministry of labor data, it has been found that 90% of the population went under poverty due to current situation of COVID-19.

As per figure 2, the study indicates that 68% of those who lost income or employment reported negative mental health from stress or depression over COVID-19 compared to 46% of those who had not lost income or employment.

Figure 2: Percent of adults who say stress or depress related to COVID-19 has had negative psychological health based on job or income loss



Note: * indicates a statistically significant difference between those loss job or income loss and those have not loss job or income at the P < 0.05 * level.

Source: Output generated from SPSS

Figure 3 indicates that people with low incomes were also reported negative mental health impacts from stress or depression over Covid-19. 36% of them are making less than AFN 200,000 reported experiencing a more negative mental health compared to 19% of those making AFN 200,000 or more per annum.

Figure 3: Percent of adults who says stress or depress related to Covid-19 has had negative impact on psychological health by house hold income



Note: * indicates a statistically significant difference between those who have income less than AFN 200,000 and above AFN 200,000 at the P < 0.05 * level.

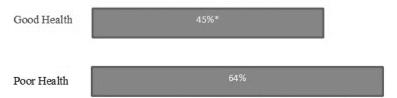
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4.3. Psychological health risks due to poor physical health

According to research and World Health Organization - WHO's statements, people who have chronic illness such as: asthma, lung disease, heart problems and diabetes are on a high risk of infection from COVID-19.

Figure 4 shows that 64% of those with poor physical health reported stress or depression related to COVID-19 has negatively impacted their mental health, compared to 45% of those with good physical health.

Figure 4: Percent of adults who says stress or depress related to COVID-19 has had negative impact on psychological health by health Status



Note: * indicates a statistically significant difference between have good health and poor health at the P < 0.05 * level.

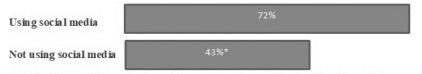
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4.4. Psychological health risks due to poor Social media information

As present scenario most of people use social media as a tool for entrainment, however sometimes many false statement or wrong information shared through social media. False information can be spread easily through social media platform, resulting in widespread real world impact. (Kumar et. al 2018)

Figure 5 shows that 72% of those with poor social media information like fake news reported stress or depression related to COVID-19 has negatively impacted their mental health, compared to 43% of those which are having no social media information.

Figure 5: Percent of adults who says stress or depress related to COVID-19 has had negative impact on psychological health by using social media



Note: * indicates a statistically significant difference between those social media information and those were not using social media information at the P < 0.05 * level.

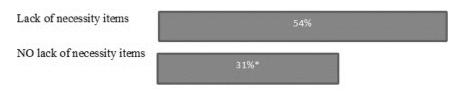
Source: Output generated from SPSS

4.5 Psychological health risks due to lack of necessity items

Importers and businessman were finding hard to keep up the flow of supply of essentials item with most of the market across the world, such as grain, pulses, vegetable, edible oil being disrupted due to lack of workers and transport facilitates. (Rajesh beyani, 2020)

Figure 6 shows that 54% of those who have lack of necessity items report stress of depression related to COVID-19 has negatively impacted their mental health, compared to 31% of those which have no issues with necessity items.

Figure 6: Percent of adults who says stress or depress related to COVID-19 has had negative impact on psychological health by Lack of necessity items



Note: * indicates a statistically significant difference between those lack of necessity items and those who didn't have lack of necessity items at the P < 0.05 * level.

Source: Output generated from SPSS

5. Discussion

The overall study found significant effect of social distancing/isolation on psychological health risk. 56% people who were in social distancing/isolation suffering from psychological health risk. Similarly, it found significant effect of due to Covid-19 those people who lost their job or income has 68% negative effect on their psychological health risk and people along with this those people whose income was less than AFN 200,000 suffering 36% psychological health risk. Furthermore, it found that 64% people reported than due to poor physical health and the covid-19 situation has effect on their psychological health risk. 72% people reported psychological health risk due to using social media information as a tool of news of Covid-19. At last 55% people reported psychological health risk due to lack of necessity items during Covid-19.

In respect of the psychological health inferences of the Corona virus (COVID-19) pandemic, the World Health Organization (WHO) released a list of concerns to address the mental well-being of the people, specifically high risk groups like older adults, children and health care workers.

This pandemic is likely to have both short and long-term consequences for Psychological health and generous use. Those with Psychological illness and generous use disorder pre-pandemic and those who recently affected, may likely require mental health and generous use services.

As policy-makers across the world continue to make further actions to lighten the burdens of the Covid-19 situation. Further data will be needed to measure its growing effects on mental health. The recently increased mental health cases need more mental health and consultancy services by government and social organizations. As suicidal cases due to poor mental health has increased due to Covid-19, government needs to focus on measurement of Psychological health effects on general public and take proper mitigation actions accordingly.

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